

OCCURRENCE DATE(S) ON OR BETWEEN				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011567		STN# 01		PRIMAR YES																						
MM/DD/YY 08/07/2015		MM/DD/YY 08/08/2015		MM/DD/YY 08/08/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011567		BURGLAR FORCE NO F. <input checked="" type="checkbox"/> <input type="checkbox"/>		NO. OF UNITS ENT. 2																						
TIME 13:03		DAY OF WEEK FRID		TIME 11:48		DAY OF WEEK SAT		TIME 09:13		DAY OF WEEK SAT		ADDRESS / LOCATION OF INCIDENT 1299 VEGAS VERDE #37				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO <input type="checkbox"/> <input checked="" type="checkbox"/>		HATE / BIAS MOT. CODE														
OFFENSE	OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING											
	1 BURGLARY AUTO, WATERCRAFT, COMME						30-16-3B		F		C		23F		NO		NO		NO				20		01		UNK YES UNK											
	2 CONSPIRACY IN THE 4TH DEGREE						30-28 2		N		C		23F		NO		NO		NO				20		01		UNK YES NO											
	3 CONTROL/D/COUNFIT SUBSTANCE/DIS						30-31-22		F		C		35A		NO		NO		NO		D		14		01		UNK YES NO											
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON INTERVIEWED						V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY		O-OTHER		TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION				M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH				U-UNCONSCIOUSNESS N-NONE				ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN A-AMERICAN INDIAN/NATIVE AMERICAN				A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE O-OTHER U-UNKNOWN			
	PERSON CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ANTONIO E																															
	STREET ADDRESS 1011 DON JUAN						APT. NO.		CITY SANTA FE						CTY. 01		STATE NM		ZIP 87501																			
	RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.				DOB		AGE		SEX M		RACE WHT BLK ASIA IND UNK																			
	HEIGHT 5' 10"		WEIGHT 143 LBS		HAIR BRO		EYES HAZ		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.													
	PERSON CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ANTONIA F																															
	STREET ADDRESS 1011 DON JUAN						APT. NO.		CITY SANTA FE						CTY. 01		STATE NM		ZIP 87501																			
	RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.				DOB		AGE		SEX F		RACE WHT BLK ASIA IND UNK																			
	HEIGHT 5' 02"		WEIGHT 120 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.													
	PROPERTY STATUS 1		PROPERTY TYPE 36		TYPE OF ITEM DRILL		MAKE / BRAND MAKITA		MODEL 18V CORDLESS		CALIBER		VALUE \$200.00		DRUG VALUE																							
	SUSPECTED DRUG TYPE		QUANTITY 1		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) BLUE IN COLOR ISIDE OF WHITE BOX				SERIAL / OAN				DATE RECOVERED		N.I.C. NO.																					
	PROPERTY STATUS 1		PROPERTY TYPE 36		TYPE OF ITEM SAW		MAKE / BRAND SKILSAW		MODEL CORDED		CALIBER		VALUE \$50.00		DRUG VALUE																							
	SUSPECTED DRUG TYPE		QUANTITY 1		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) CORDED CIRCULAR SAW				SERIAL / OAN				DATE RECOVERED		N.I.C. NO.																					
	YEAR 1996		MAKE GMC		MODEL BLZ		BODY STYLE UT		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR RED		BTM. COLOR RED																					
	VALUE / DAMAGE EST.																																					
SYNOPSIS	ON SATURDAY, AUGUST 8TH, 2015 AT APPROXIMATELY 0919, I WAS DISPATCHED TO 3201 ZAFARANO DRIVE IN REFERENCE TO A BURGLARY CALL, WHICH OCCURRED ON AUGUST 7TH, 2015. DISPATCH ADVISED THAT THE VICTIM WAS FOLLOWING THE SUSPECTS IN THE BURGLARY. OFFICER ESQUIBEL #228 WAS ALSO DISPATCHED.																																					
	I ARRIVED ON SCENE AND MADE CONTACT WITH THE VICTIM, MR. REYES. MR. REYES INFORMED ME THAT YESTERDAY (08/07/2015) HIS WHITE F-150 WAS BROKEN INTO AND A MAKITA DRILL AND SKILSAW CIRCULAR SAW WERE STOLEN. MR. REYES HAD PHOTOGRAPHS OF THE SUSPECT VEHICLE AND STATED THAT HE HAD BEEN FOLLOWING IT AROUND IN THE AREA OF ZAFARANO DRIVE AND CERRILLOS																																					
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES <input type="checkbox"/> NO <input type="checkbox"/>		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE		X		DATE																											
	REPORTING OFFICER (PRINT) ROMERO, RYAN				RANK POI		I.D. NO. 6973		DATE 08/09/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO				I.D. NO.		DATE																					
	ASSISTING OFFICER (PRINT)				RANK		I.D. NO.		DATE		PROCESSED BY		DATE		DATA ENTRY PERSON		DATE																					
	APPROVING OFFICER (PRINT)				RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE <input checked="" type="checkbox"/> INACT. <input type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> CL.A. <input type="checkbox"/> CL.E. <input type="checkbox"/>		EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE		DATE																					
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.) INV, DA										CASES CLEARED BY THIS ARREST CASE NO.				CASE NO.																							

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011619		STN# 01		PRIMAR YES												
ON		OR		BETWEEN						GEOGR. CODE 01075		CASE NUMBER 15-011619		BURGLAR FORCE NO F.		NO. OF UNITS ENT.												
MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		AGENCY SANTA FE PD																						
TIME 01:00		DAY OF WEEK SUN		TIME 05:00		DAY OF WEEK SUN		TIME 01:00		DAY OF WEEK SUN		ADDRESS / LOCATION OF INCIDENT 3007 CERRILLOS ROAD				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO		HATE / BIAS MOT. CODE				
OFFENSE	OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL./ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING	
	1 UNLAWFUL TAKING MV >\$2,500						30-16D-1(A)(2)		F		C		90Z		NO		NO		NO				14				UNK UNK NO	
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY		O-OTHER		TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE		W-WHITE O-OTHER U-UNKNOWN			
	PERO N CODE V		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) BALDANADO NICOLE																					
	STREET ADDRESS 1299 VEGAS VERDES						APT. NO. 93		CITY SANTA FE						CTY. 01		STATE NM		ZIP 87505									
	RES. PHONE (505) 577-0383				BUS. PHONE				SOCIAL SECURITY NO.				DOB		AGE		SEX F		RACE WHT BLK ASIA IND UNK									
	HEIGHT 5' 01"		WEIGHT 190 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
	PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																					
	STREET ADDRESS						APT. NO.		CITY						CTY.		STATE		ZIP									
	RES. PHONE				BUS. PHONE				SOCIAL SECURITY NO.				DOB		AGE		SEX		RACE WHT BLK ASIA IND UNK									
	HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
	PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER		VALUE		DRUG VALUE							
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN				DATE RECOVERED		N.I.C. NO.										
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER		VALUE		DRUG VALUE								
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN				DATE RECOVERED		N.I.C. NO.										
YEAR 2007		MAKE GMC				MODEL				BODY STYLE UT				LICENSE NO. 1501UNM		LIC. YEAR 2016		LIC. ST. NM		TOP COLOR WHI		BTM. COLOR WHI						
VALUE / DAMAGE EST.																												
SYNOPSIS	BETWEEN THE HOURS OF 0100 A.M. AND 0500 A.M. A WHITE 2007 GMC ACADIA BEARING NEW MEXICO LICENSE PLATE OF 1501UNM. THE VEHICLE WAS TAKEN FROM 3007 CERRILLOS ROAD.																											
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES		NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."				COMPLAINANT / VICTIM CERTIFICATION SIGNATURE				X				DATE									
	REPORTING OFFICER (PRINT) ABBO, CHRISTOPHER						RANK POI		I.D. NO. 7199		DATE 08/09/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO						I.D. NO.		DATE							
	ASSISTING OFFICER (PRINT)						RANK		I.D. NO.		DATE		PROCESSED BY				DATE		DATA ENTRY PERSON				DATE					
	APPROVING OFFICER (PRINT) SERGEANT C. VARELA JR.						RANK SGT		I.D. NO. 4209		DATE 08/09/2015		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CL.A. CL.E. [X] [] [] [] [] []				EXCEPT CODE N		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE				DATE 08/09/2015					
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.) INV												CASES CLEARED BY THIS ARREST CASE NO.				CASE NO.				CASE NO.							

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011644		STN# 06		PRIMAR NO												
ON		OR		BETWEEN																								
MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011644		BURGLAR FORCE NO. F. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		NO. OF UNITS ENT.												
TIME 17:50		DAY OF WEEK SUN		TIME 18:25		DAY OF WEEK SUN		TIME 19:13		DAY OF WEEK SUN		ADDRESS / LOCATION OF INCIDENT 1301 OSAGE AVE				CITY SANTA FE		CTY. ZIP 87505		GANG REL. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		HATE / BIAS MOT. CODE						
OFFENSE	OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING	
	1 CRIM DAMAGE OVER 1000						30-15-1		F		C		220		NO		NO		NO				13					
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSSES)	PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON H-INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ R-RUNAWAY		O-OTHER		TYPE CODES I-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE U-UNKNOWN		W-WHITE O-OTHER U-UNKNOWN			
	PERO N CODE V		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) MARTINEZ LEONOR L																					
	STREET ADDRESS 712 PALOMAS DR NE						APT. NO.		CITY ALBUQUERQUE						CTY.		STATE NM		ZIP 87108-0000									
	RES. PHONE (505) 903-2532						BUS. PHONE		SOCIAL SECURITY NO.				DOB		AGE		SEX F		RACE WHT BLK ASIA IND UNK									
	HEIGHT 5' 05"		WEIGHT 140 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
	PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																					
	STREET ADDRESS						APT. NO.		CITY						CTY.		STATE		ZIP									
	RES. PHONE						BUS. PHONE		SOCIAL SECURITY NO.				DOB		AGE		SEX		RACE WHT BLK ASIA IND UNK									
	HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
	PROPERTY STATUS 9		PROPERTY TYPE 38		TYPE OF ITEM DRIVER'S SIDE WINDO		MAKE / BRAND LEXUS		MODEL		CALIBER		VALUE \$600.00		DRUG VALUE													
SUSPECTED DRUG TYPE		QUANTITY 2		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) BROKEN WINDOW				SERIAL / OAN		DATE RECOVERED		N.I.C. NO.														
PROPERTY STATUS 9		PROPERTY TYPE 38		TYPE OF ITEM DOOR FRAME		MAKE / BRAND LEXUS		MODEL		CALIBER		VALUE \$400.00		DRUG VALUE														
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) DAMAGED				SERIAL / OAN		DATE RECOVERED		N.I.C. NO.														
YEAR 2005		MAKE LEXU		MODEL		BODY STYLE 4D		LICENSE NO. 711PHR		LIC. YEAR 2016		LIC. ST. NM		TOP COLOR GRY		BTM. COLOR GRY												
VALUE / DAMAGE EST. 600																												
SYNOPSIS	ON AUGUST 9, 2015 BETWEEN THE HOURS OF 1750 AND 1830 UN KNOWN SUSPECT BROKEN TWO WINDOWS ON A LEXUS AT ST JOHNS CHURCH. THERE WAS NOTHING TAKEN FROM THE VEHICLE. THERE WERE NO SIGNS OF TRACE EVIDENCE.																											
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES <input type="checkbox"/>		NO <input type="checkbox"/>		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X		DATE																	
	REPORTING OFFICER (PRINT) MONTANO, AMANADA				RANK P0 II		I.D. NO. 6442		DATE 08/09/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO I.D. NO.				DATE													
	ASSISTING OFFICER (PRINT)				RANK		I.D. NO.		DATE		PROCESSED BY		DATE		DATA ENTRY PERSON		DATE											
	APPROVING OFFICER (PRINT) ZUMENTS, KYLE				RANK SGT		I.D. NO. 2067		DATE 08/09/2015		INCIDENT STATUS ACTIVE <input type="checkbox"/> INACT. <input checked="" type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> CL.A. <input type="checkbox"/> CLE. <input type="checkbox"/>		EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE NO CUSTODY N-NOT APPLICABLE		DATE											
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)										CASES CLEARED BY THIS ARREST CASE NO.		CASE NO.		CASE NO.													

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011638		STN# 07		PRIMAR YES													
ON OR BETWEEN						AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011638		BURGLAR FORCE <input type="checkbox"/> NO <input type="checkbox"/>		NO. OF UNITS ENT.											
MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		TIME 17:30		DAY OF WEEK SUN		ADDRESS / LOCATION OF INCIDENT 601 ALTA VISTA				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		HATE / BIAS MOT. CODE							
OFFENSE / INCIDENT		STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING					
1 WARRANT SERVICE		SFPD-03		F		C		90Z		NO		NO		NO				13				ALCOH. NO		DRUG NO		COMP. NO	

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011619		STN# 01		PRIMAR YES																																																														
MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		MM/DD/YY 08/09/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011619		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																																																														
TIME 01:00		DAY OF WEEK SUN		TIME 05:00		DAY OF WEEK SUN		TIME 01:00		DAY OF WEEK SUN		ADDRESS / LOCATION OF INCIDENT 3007 CERRILLOS ROAD				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO		HATE / BIAS MOT. CODE																																																						
OFFENSE	OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL / MISD.		ATTEMPTED / COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING																																																			
	1 UNLAWFUL TAKING MV >\$2,500						30-16D-1(A)(2)		F		C		90Z		NO		NO		NO				14				UNK UNK NO																																																			
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON H-INTERVIEWED						V-VICTIM C-CITED S-SUSPECT A-ARRESTED M-MISSING PERSON/ R-RUNAWAY						W-WITNESS D-DECEASED M-MISSING PERSON/ R-RUNAWAY						O-OTHER						TYPE CODES I-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.						P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB						O-OTHER U-UNKNOWN						INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION						M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH						U-UNCONSCIOUSNESS N-NONE						ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN I-AMERICAN INDIAN/NATIVE AMERICAN						A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE						W-WHITE O-OTHER U-UNKNOWN					
	PERSON CODE V		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) BALDANADO NICOLE																																																																							
	STREET ADDRESS 1299 VEGAS VERDES										APT. NO. 93		CITY SANTA FE										CTY. 01		STATE NM		ZIP 87505																																																			
	RES. PHONE (505) 577-0383										BUS. PHONE										SOCIAL SECURITY NO.				DOB				AGE		SEX F		RACE WHT BLK ASIA IND UNK																																													
	HEIGHT 5' 01"		WEIGHT 190 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.																																																	
	PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																																																																							
	STREET ADDRESS										APT. NO.		CITY										CTY.		STATE		ZIP																																																			
	RES. PHONE										BUS. PHONE										SOCIAL SECURITY NO.				DOB				AGE		SEX		RACE WHT BLK ASIA IND UNK																																													
	HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.																																																	
	PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER				VALUE				DRUG VALUE																																																					
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)								SERIAL / OAN				DATE RECOVERED				N.I.C. NO.																																																								
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER				VALUE				DRUG VALUE																																																						
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)								SERIAL / OAN				DATE RECOVERED				N.I.C. NO.																																																								
YEAR 2007		MAKE GMC				MODEL				BODY STYLE UT				LICENSE NO. 1501UNM				LIC. YEAR 2016		LIC. ST. NM		TOP COLOR WHI				BTM. COLOR WHI																																																				
VALUE / DAMAGE EST.																																																																														
SYNOPSIS	BETWEEN THE HOURS OF 0100 A.M. AND 0500 A.M. A WHITE 2007 GMC ACADIA BEARING NEW MEXICO LICENSE PLATE OF 1501UNM. THE VEHICLE WAS TAKEN FROM 3007 CERRILLOS ROAD.																																																																													
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."						YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."						COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X						DATE																																																									
	REPORTING OFFICER (PRINT) ABBO, CHRISTOPHER						RANK POI		I.D. NO. 7199		DATE 08/09/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO						I.D. NO.		DATE																																																									
	ASSISTING OFFICER (PRINT)						RANK		I.D. NO.		DATE		PROCESSED BY				DATE		DATA ENTRY PERSON				DATE																																																							
	APPROVING OFFICER (PRINT) SERGEANT C. VARELA JR.						RANK SGT		I.D. NO. 4209		DATE 08/09/2015		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CL.A. CL.E. N						EXCEPT CODE N		A-DEATH OF OFFENDER DECLINED B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE						DATE 08/09/2015																																																			
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.) INV												CASES CLEARED BY THIS ARREST CASE NO.						CASE NO.						CASE NO.																																																					

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO.		INCIDENT NO.		STN#		PRIMAR																			
ON OR BETWEEN										NM0260100		15-011623		03		YES																			
MM/DD/YY		MM/DD/YY		MM/DD/YY		AGENCY				GEOGR. CODE		CASE NUMBER		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																			
08/08/2015		08/09/2015		08/09/2015		SANTA FE PD				01075		15-011623		<input checked="" type="checkbox"/> <input type="checkbox"/>		3																			
TIME		DAY OF WEEK		TIME		DAY OF WEEK		TIME		DAY OF WEEK		ADDRESS / LOCATION OF INCIDENT				CITY		CTY.		ZIP		GANG REL. YES NO		HATE / BIAS MOT. CODE											
22:00		SAT		02:00		SUN		09:29		SUN		2800 CERRILOS ROAD #173				SANTA FE		01		87505		<input type="checkbox"/> <input checked="" type="checkbox"/>		00											
OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING									
						30-16-3		F		C		240		NO		NO		NO				18		95				UNK		UNK		NO			
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)						PERSON CODES		V-VICTIM		W-WITNESS		O-OTHER		TYPE CODES		P-POLICE		G-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE									
						G-PARENT/GUARDIAN		C-CITED		D-DECEASED		H-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-BAPPARENT BROKEN BONE		M-APPARENT MINOR INJURY		U-UNCONSCIOUSNESS		B-BLACK		C-CHINESE		O-OTHER							
						R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/		B-BUSINESS		R-RELIGIOUS				I-POSSIBLE INTERNAL INJURY		O-OTHER MAJOR INJURY		N-NONE		H-HISPANIC/MEXICAN		J-JAPANESE		U-UNKNOWN							
						INTERVIEWED		A-ARRESTED		RUNAWAY		F-FINANCIAL INST.		S-SOCIETY/PUB				L-SEVERE LACERATION		T-LOSS OF TEETH				A-AMERICAN INDIAN/NATIVE AMERICAN											
						PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)										APT. NO.		CITY		CTY.		STATE		ZIP					
						V		I		N		SOLANO-MARTINEZ										173		SANTA FE		01		NM		87507-0000					
						STREET ADDRESS						2800 CERRILLOS RD APT 17						RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE					
												(505) 204-3255																M		WHT BLK ASIA IND UNK					
						HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.					
						5' 10"		168 LBS		BLK		BRO																							
PERO N CODE						TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)										APT. NO.		CITY		CTY.		STATE		ZIP							
STREET ADDRESS						2800 CERRILLOS RD APT 17						RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE											
												(505) 204-3255												WHT BLK ASIA IND UNK											
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.											
5' 10"		168 LBS		BLK		BRO																													
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																					
1		36		DRILL		BOSCH						\$500.00																							
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																							
		1				BLUE/GREEN																													
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																					
1		36		SAW		DEWALT						\$480.00																							
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																							
		2				IMPACT DRILL AND SAW INSIDE YELLOE BAG																													
YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR																			
2096		CHEV		150		PK		NFN510		2017		NM		WHI		WHI																			
VALUE / DAMAGE EST.						100																													
SYNOPSIS						A BURGLARY OF A MOTOR VEHICLE WAS REPORTED AT 2800 CERRILLOS ROAD. UNKNOWN PERSON(S) BROKE OUT REAR DRIVER SIDE WINDOW AND STILE MISCELLANEOUS CONSTRUCTION TOOLS FROM INSIDE THE TRUCK.																													
						"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."						YES		NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."						COMPLAINANT / VICTIM CERTIFICATION SIGNATURE						X		DATE					
						REPORTING OFFICER (PRINT)						RANK		I.D. NO.		DATE		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO						I.D. NO.		DATE									
						GUERRERO, ANTHONY						POIV		4396		08/09/2015		INV																	
						ASSISTING OFFICER (PRINT)						RANK		I.D. NO.		DATE		PROCESSED BY						DATE		DATA ENTRY PERSON		DATE							
APPROVING OFFICER (PRINT)						RANK		I.D. NO.		DATE		INCIDENT STATUS						EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE NO CUSTODY N-NOT APPLICABLE						DATE									
												ACTIVE INACT. CLOSED U.F. CL.A. CL.E.																							
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)						INV						CASES CLEARED BY THIS ARREST						CASE NO.						CASE NO.											

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011670		STN# 03		PRIMAR YES																								
ON		OR		BETWEEN																																				
MM/DD/YY 08/08/2015		MM/DD/YY		MM/DD/YY 08/09/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011670		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																								
TIME 23:34		DAY OF WEEK SAT		TIME 23:34		DAY OF WEEK SUN		ADDRESS / LOCATION OF INCIDENT CERRILLOS ROAD/OSAGE				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO		HATE / BIAS MOT. CODE																				
OFFENSE	OFFENSE / INCIDENT					STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING														
	1 WARRANT SERVICE					SFPD-03		F		C				NO		NO		NO				13				YES NO NO														
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED		V-VICTM C-CITED S-SUSPECT A-ARRESTED R-RUNAWAY		W-WITNESS D-DECEASED M-MISSING PERSON/ R-RUNAWAY		O-OTHER		TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-B-APPARENT BROKEN BONE I-I-POSSIBLE INTERNAL INJURY L-L-SEVERE LACERATION		M-M-APPARENT MINOR INJURY O-O-OTHER MAJOR INJURY T-T-LOSS OF TEETH		U-U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-B-BLACK H-H-HISPANIC/MEXICAN J-J-JAPANESE A-A-AMERICAN INDIAN/NATIVE AMERICAN		A-A-ASIAN/ORIENTAL C-C-CHINESE J-J-JAPANESE O-O-OTHER U-U-UNKNOWN		W-W-WHITE O-O-OTHER U-U-UNKNOWN															
	PERO N CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ORTIZ										EMMIT																							
	STREET ADDRESS 4295 AGUA FRIA STREET										APT. NO.		CITY SANTA FE										CTY. 01		STATE NM		ZIP 87505													
	RES. PHONE					BUS. PHONE					SOCIAL SECURITY NO.					DOB					AGE		SEX M		RACE WHT BLK ASIA IND UNK															
	HEIGHT 5' 09"		WEIGHT 135 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.															
	PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																																	
	STREET ADDRESS										APT. NO.		CITY										CTY.		STATE		ZIP													
	RES. PHONE					BUS. PHONE					SOCIAL SECURITY NO.					DOB					AGE		SEX		RACE WHT BLK ASIA IND UNK															
	HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.															
	PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER		VALUE		DRUG VALUE																			
	SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN				DATE RECOVERED		N.I.C. NO.																					
	PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER		VALUE		DRUG VALUE																			
	SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN				DATE RECOVERED		N.I.C. NO.																					
	YEAR		MAKE				MODEL				BODY STYLE				LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR																	
	VALUE / DAMAGE EST.																																							
SYNOPSIS																				ON AUGUST 8, 2015 AT APPROXIMATELY 11:34 PM, I SERVED A DISTRICT COURT WARRANT ON A EMMIT ORTIZ UNDER DOCKET NUMBER (D-0101-CR-2015-0076). THE WARRANT WAS SIGNED BY HONORABLE JUDGE GLENN ELLINGTON AND A NO BOND WAS SET. MR. ORTIZ WAS THEN TRANSPORTED TO THE ADULT DETENTION CENTER WHERE HE WAS BOOKED ACCORDINGLY. AT THE TIME OF ARREST MR. ORTIZ HAD NO MINOR CHILDREN TO CARE FOR. NO FURTHER ACTION TAKEN.																				
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."										YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."										COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X										DATE 08/08/2015							
	REPORTING OFFICER (PRINT) ANAYA, ISIAHAH										RANK PO I		I.D. NO. 5773		DATE 08/08/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO										I.D. NO.		DATE 08/08/2015											
	ASSISTING OFFICER (PRINT)										RANK		I.D. NO.		DATE		PROCESSED BY										DATE		DATA ENTRY PERSON		DATE									
	APPROVING OFFICER (PRINT)										RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CL.A. CL.E.										EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE										DATE 08/08/2015	
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)										CASES CLEARED BY THIS ARREST CASE NO.										CASE NO.										CASE NO.									

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011567		STN# 01		PRMAR YES																											
ON OR BETWEEN																																									
MM/DD/YY 08/07/2015		MM/DD/YY 08/08/2015		MM/DD/YY 08/08/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011567		BURGLAR FORCE NO. F. NO. OF UNITS ENT. 2																											
TIME 13:03		DAY OF WEEK FRID		TIME 11:48		DAY OF WEEK SAT		TIME 09:13				DAY OF WEEK SAT		ADDRESS / LOCATION OF INCIDENT 1299 VEGAS VERDE #37																											
										CITY SANTA FE		CTY. 01		ZIP 87507																											
OFFENSE / INCIDENT														STATUTE OR ORDINANCE		FEL./ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING							
1 BURGLARY AUTO, WATERCRAFT, COMME														30-16-3B		F		C		23F		NO		NO		NO				20		01				UNK		YES		UNK	
2 CONSPIRACY IN THE 4TH DEGREE														30-28 2		N		C		23F		NO		NO		NO				20		01				UNK		YES		NO	
3 CONTROL/D/COUNFIT SUBSTANCE/DIS														30-31-22		F		C		35A		NO		NO		NO		D		14		01				UNK		YES		NO	

OCCURRENCE DATE(S)						DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET							ORI NO. NM0260100		INCIDENT NO. 15-011571		STN# 2		PRIMAR YES									
ON OR BETWEEN																														
MM/DD/YY 08/07/2015			MM/DD/YY 08/08/2015			MM/DD/YY 08/08/2015			AGENCY SANTA FE PD									GEOGR. CODE 01075		CASE NUMBER 15-011571		BURGLAR FORCE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		NO. OF UNITS ENT.						
TIME 21:00		DAY OF WEEK FRID		TIME 09:00		DAY OF WEEK SAT		TIME 12:56		DAY OF WEEK SAT		ADDRESS / LOCATION OF INCIDENT 2302 CEDROS CIRCLE									CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		HATE / BIAS MOT. CODE	
OFFENSE / INCIDENT										STATUTE OR ORDINANCE		FEL./ MISD.	ATTEMPTED/ COMPLETED	UCR OFFENSE CODE	DOM. VIOL.	SEX CRIME?	CHILD	CRIMINAL ACTIVITY CODE	LOCAT. CODE	WEAPON CODE UP TO 3 PER OFFENSE	OFFENDER(S) SUSPECTED OF USING									
										1 BURGLARY		30-16-3	F	C	220	NO	NO	NO		13	99			UNK	UNK	NO				
PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED										V-VICTIM C-CITIZEN S-SUSPECT A-ARRESTED	W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY	O-OTHER	TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB	O-OTHER U-UNKNOWN	INJURY CODES B-APPARENT BROKEN BONE P-POSSIBLE INTERNAL INJURY L-LOSS OF TEETH		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-TLOSS OF TEETH	U-UNCONSCIOUSNESS N-NONE	ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE	W-WHITE O-OTHER U-UNKNOWN						
PERSON N CODE R		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ROMO CESAR JR																								
STREET ADDRESS 2302 CEDROS CIRCLE										APT. NO.		CITY SANTA FE										CTY. 01		STATE NM		ZIP 87505				
RES. PHONE (505) 603-5281					BUS. PHONE					SOCIAL SECURITY NO.					DOB			AGE		SEX M		RACE WHI BLK ASIA IND LNK								
HEIGHT 5' 11"		WEIGHT 183 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.						
PERSON N CODE V		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) ROMO CESAR																								
STREET ADDRESS 2302 CEDROS CIRCLE										APT. NO.		CITY SANTA FE										CTY. 01		STATE NM		ZIP 87505				
RES. PHONE (505) 629-3945					BUS. PHONE					SOCIAL SECURITY NO.					DOB			AGE		SEX M		RACE WHI BLK ASIA IND LNK								
HEIGHT 5' 11"		WEIGHT 165 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.						
PROPERTY STATUS 1		PROPERTY TYPE 36		TYPE OF ITEM PRESSURE WASHER				MAKE / BRAND HONDA				MODEL 2800				CALIBER				VALUE \$450.00		DRUG VALUE								
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) RED BLACK WITH GREY HOSE						SERIAL / OAN BM80920				DATE RECOVERED				N.I.C. NO. A283027337										
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER				VALUE		DRUG VALUE								
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN				DATE RECOVERED				N.I.C. NO.										
YEAR 2000		MAKE CHEV				MODEL SLV				BODY STYLE PK				LICENSE NO. 0394778				LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR						
VALUE / DAMAGE EST. 0																														
SYNOPSIS ON FRIDAY 08-08-15 UNKNOWN PERSON(S) TOOK A PRESSURE WASHER FROM A VEHICLE PARKED AT THE 2300 BLOCK OF CEDROS CIRCLE. NO WITNESSES OR SUSPECTS. THE ITEM WAS ENTERED INTO NCIC.																														
CERT / STATUS		"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."				COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X								DATE												
REPORTING OFFICER (PRINT) NIETO, JOSEPH						RANK POIV		I.D. NO. 3679		DATE 08/08/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO						I.D. NO.		DATE										
ASSISTING OFFICER (PRINT)						RANK		I.D. NO.		DATE		PROCESSED BY				DATE		DATA ENTRY PERSON				DATE								
APPROVING OFFICER (PRINT)						RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE <input checked="" type="checkbox"/> INACT. <input type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> CL.A. <input type="checkbox"/> CLE. <input type="checkbox"/>				EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF.TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE				DATE								
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)												CASES CLEARED BY THIS ARREST CASE NO.				CASE NO.				CASE NO.										

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011590		STN# 03		PRIMAR YES																			
ON		OR		BETWEEN		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011590		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																			
MM/DD/YY 08/08/2015		MM/DD/YY		MM/DD/YY 08/08/2015		ADDRESS / LOCATION OF INCIDENT CERRILLOS RD/WAGON ROAD				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO		HATE / BIAS MOT. CODE																	
TIME 15:33		DAY OF WEEK SAT		TIME 15:34		DAY OF WEEK SAT		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE 90Z		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE 13		WEAPON CODE UP TO 3 PER OFFENSE 01		OFFENDER(S) SUSPECTED OF USING		ALCOH. YES NO		DRUG YES NO		COMP.			
OFFENSE		OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING		ALCOH.		DRUG		COMP.	
		1 WARRANT SERVICE						SFPD		N		C		90Z		NO		NO		NO				13		01		YES		UNK		NO			
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)		PERSON CODES		V-VICTIM		W-WITNESS		O-OTHER		TYPE CODES		P-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE													
		G-PARENT/GUARDIAN		C-CITIZEN		D-DECEASED				H-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-APPARENT BROKEN BONE		B-BLACK		C-CHINESE		O-OTHER													
		R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/				B-BUSINESS		R-RELIGIOUS				M-APPARENT MINOR INJURY		H-HISPANIC/MEXICAN		J-JAPANESE															
		INTERVIEWED		A-ARRESTED		RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PUB				O-OTHER MAJOR INJURY		K-KAMERICAN INDIAN/NATIVE AMERICAN		U-UNKNOWN															
		PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																											
		A		I		M		REANO																											
								LIONEL																											
								F																											
								STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP																	
								COCHITI STREET 2				SANTO DOMINGO PUEBLO		29		NM		87052																	
						RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE																	
						(505) 280-8568										M		WHT BLK ASIA IND UNK																	
						HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.					
						5' 08"		180 LBS		BRO		BRO																							
						PERSON CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																							
						STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP																			
						RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE																	
																		WHT BLK ASIA IND UNK																	
						HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.					
						PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE															
						SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																	
						PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE															
						SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																	
						YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR													
						VALUE / DAMAGE EST.																													
SYNOPSIS		ON SATURDAY, AUGUST 8TH, 2015, AN OFFICER WAS DISPATCHED TO CERRILLOS ROAD AND WAGON ROAD IN REFERENCE TO A WELFARE CHECK OF A MALE LAYING ON THE GROUND.																																	
CERT./STATUS		"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE		X		DATE																							
		REPORTING OFFICER (PRINT)		RANK		I.D. NO.		DATE		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO		I.D. NO.		DATE																					
		LUCERO, GREGORY				7113		08/08/2015																											
		ASSISTING OFFICER (PRINT)		RANK		I.D. NO.		DATE		PROCESSED BY		DATE		DATA ENTRY PERSON		DATE																			
CERT./STATUS		APPROVING OFFICER (PRINT)		RANK		I.D. NO.		DATE		INCIDENT STATUS		EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE		DATE																			
		BAKER, TROY		SGT				08/08/2015		ACTIVE INACT. CLOSED U.F. CL.A. CL.E.																									
CERT./STATUS		AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)										CASES CLEARED BY THIS ARREST					CASE NO.					CASE NO.													
												CASE NO.																							

OCCURRENCE DATE(S)			DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011580		STN# 06		PRIMAR YES																		
ON		OR		BETWEEN																													
MM/DD/YY 08/08/2015		MM/DD/YY 08/08/2015		MM/DD/YY 08/08/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011580		BURGLAR FORCE NO. F. YES NO		NO. OF UNITS ENT. 1																	
TIME 13:50		DAY OF WEEK SAT		TIME 13:50		DAY OF WEEK SAT		TIME 15:29		DAY OF WEEK SAT		ADDRESS / LOCATION OF INCIDENT 1549 SIXTH STREET				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO YES		HATE / BIAS MOT. CODE									
OFFENSE		OFFENSE / INCIDENT						STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING					
		1 BURGLARY AUTO, WATERCRAFT, COMME						30-16-3B		F		C		23F		NO		NO		NO				25				UNK		UNK		UNK	
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)		PERSON CODES		V-VICTIM		W-WITNESS		O-OTHER		TYPE CODES		P-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE											
		G-PARENT/GUARDIAN		C-CITED		D-DECEASED				I-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-APPARENT BROKEN BONE		B-BLACK		C-CHINESE		O-OTHER											
		R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON				B-BUSINESS		R-RELIGIOUS				M-APPARENT MINOR INJURY		H-HISPANIC/MEXICAN		J-JAPANESE		U-UNKNOWN											
		I-INTERVIEWED		A-ARRESTED		R-RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PUB				O-OTHER MAJOR INJURY		U-UNCONSCIOUSNESS		A-AMERICAN INDIAN/NATIVE AMERICAN		O-OTHER											
		PERSO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																									
		R		I		N		YOUNG																									
								ROBERT																									
								S																									
								STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP															
								90 BISHOP LAMY RD				LAMY		01		NM		87540-0000															
						RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE															
						(505) 466-2930										M		WHT BLK ASIA IND UNK															
						HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
						5' 09"		160 LBS				HAZ																					
						PERSO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																					
						V		I		N		LEYBA																					
						JUDY						A																					
						STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP																	
						1226 MAEZ RD				SANTA FE		01		NM		87505-0000																	
						RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE															
						(505) 471-2307										F		WHT BLK ASIA IND UNK															
						HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.			
						5' 00"		145 LBS		BRO		BRO																					
						PROPERTY STATUS		PROPERTY TYPE</																									